FEDERAL LA CALIDA COMPLISSION PUBLIC DISCLOSURE DIVISION

2012 JAN 17 AM 10: 41

### **Protecting Our Vote PAC**

1/13/2012

Federal Election Commission 999 E Street, NW Washington, DC 20463

Re: Form 1, Statement of Organization – Unlimited Contributions.

#### To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in *SpeechNow v. FEC*, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates, federal party committees, or federal PACs that make contributions to federal candidates or federal party committees.

Respectfully submitted,

Marcus S. Mason

Treasurer

# 12030704347

**FEC** FORM 1

## STATEMENT OF **ORGANIZATION**

RECEIVED

2012 JAN 13 PM 4: 39

	<del></del>		FEC	Manipa destavity (* D
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M	5
Protecting Our V	ote PAC		<u> </u>	
<u> </u>	700 13th Stro	oct NIM		
ADDRESS (number and street)	700 13th Stre	et, INVV		
(Check if address	Suite 600		<b>D</b> O	20005
is changed)	Washington		DC	20005
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES		•		
(Check if address	ProtectingOu	ırVotePAC@gm	ail,com	
is changed)		1111111		
COMMITTEE'S WEB PAGE ADD				
(Check if address	www.protecti	ngourvote,com,	1111	
is changed)				
2. DATE 01 13				
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	is Statement and to the bes	of my knowledge and belief i	it is true, coire	act and complete.
Type or Print Name of Reasurer	Marcus S. M	lason \	<u> </u>	
Signature of Treasurer			Date 0	1" 13" (2012")
		n may subject the person signing		to the penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-894-1100		FEC FORM 1 (Revised 02/2009)

!	FEC_Fo	rm 1 (Revised 02/2009) Page 2			
	TYPE OF COMMITTEE				
	ndidate	committee:			
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)			
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
Nam Cand	e of didate				
	didate / Affiliatio	on Office State Senate President District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Nam Cane	e of didate				
Par	Party Committee:				
(d)		This committee is a (National, State (Democratic, Republican, etc.) Part			
Poli	itical A	ction Committee (PAC):			
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is			
		Corporation Corporation w/o Capital Stock Labor Organization			
		Membership Organization Trade Association Cooperative			
		In addition, this committee is a Lobbyist/Registrant PAC.			
<b>(f)</b>	$\times$	This committee supports/opposes more than one Federal candinate, and is NOT a separate segregated fund or par committee. (i.e., nonconnected committee)			
		In addition, this committee is a Lobbyist/Registrant PAC.			
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Join	t Fund	Iraising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.			
	Com	mittees Participating in Joint Fundraiser			
	1.				
	2.	FEC ID number C			
	3.	FEC ID number			
	4.	FEC ID number C			

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FEC Form 1 (I	Revised 02/2009)	Page 3
Write or Type Committ	ee Name	
Protecting C	Our Vote PAC	
6. Name of Any Con	nected Organization, Affiliated Committee, Joint Fundraising Representa	ntive, or Leadership PAC Sponsor
Mailing Address		
•		
		1 1 1-1
	CITY STAT	TE ZIP CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponso
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<ol> <li>Custodian of Reco books and records.</li> </ol>	ords: Identify by name, address (phone number optional) and position of the	he person in possession of committee
Full Name	//arcuş Ş. Mason	
i dii ivanie	ı700 13th Street, NW	
Mailing Address	Suite 600	
	¡Washington , , , , , , , , , , , , , , ,	20005
Title or Position	CITY STATE	
Treasurer	Telephone number	
	name and address (phone number optional) of the treasurer of the comm nt (e.g., assistant treasurer).	nittee; and the name and address of
Full Name of Treasurer	Marcus S, Mason	
Mailing Address	700 13th Street, NW	
	Suite 600	
	[Washington DC	Cj [20005] - [
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	

] _	FEC Forn	1 (Revised 02/2009)	Page 4	
	Full Name of Designated Agent	<u>[</u>		
	Mailing Address			
		CITY STATE	ZIP CODE	
	Title or Position	Telephone number	<b>J-</b>	
٠.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.			
	[Industrial Bank			
	Mailing Address	2002,11th St, NW		
		Washington DC	20001	
		CITY STATE	ZIP CODE	
	Name of Bank, I	Depository, etc.		
		1		
	Mailing Address			
	Ividining Address	1		
			710 0005	
		CITY STATE	ZIP CODE	

# Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

The FEC added this page to the end of this filing to indicate how it was received.		
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USPS Express Mail	Postmarked	
Postmark Illegible		
No Postmark		
Overnight Delivery Service (Specify):	Shipping Date	
Next Business	s Day Delivery	
Received from House Records & Registration Office	Date of Receipt	
Received from Senate Public Records Office	Date of Receipt	
Received from Electronic Filing Office	Date of Receipt	
Other (Specify):	eceipt or Postmarked	
tenn	1/17/12	
PŘEPARER (2/2005)	DATE PREPARED	
(3/2005)		